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## BIB DATA SHEET

CONFIRMATION NO. 4487

<b>SERIAL NUMBER</b> 10/596,256	<b>FILING or 371(c) DATE</b> 06/07/2006 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1621	<b>ATTORNEY DOCKET NO.</b> X-16566		
<b>APPLICANTS</b> Rafael Ferritto Crespo, Alcobendas, SPAIN; Maria Dolores Martin-Ortega Finger, Alcobendas, SPAIN; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US04/38232 12/08/2004 which claims benefit of 60/550,636 03/05/2004 <b>** FOREIGN APPLICATIONS *****</b> EUROPEAN PATENT OFFICE (EPO) 03380288.5 12/15/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/09/2006						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <i>[Signature]</i> Examiner's Signature		<input type="checkbox"/> Met after Allowance <i>SAC</i> Initials	<b>STATE OR COUNTRY</b> SPAIN	<b>SHEETS DRAWINGS</b> 10	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> ELI LILLY & COMPANY PATENT DIVISION P.O. BOX 6288 INDIANAPOLIS, IN 46206-6288 UNITED STATES						
<b>TITLE</b> Selective peroxisome proliferator activated receptor modulators						
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		